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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Ide | entify Yourself | | |
|----|---|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your fu | ıll name | | |
| | Write th | ne name that is on | O'Neal | |
| | your government-issued picture identification (for example, your driver's | identification (for | First name | First name |
| | | or passport). | Middle name | Middle name |
| | | our picture | Oblifias | |
| | | cation to your g with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | | er names you have n the last 8 years | | |
| | | your married or names. | | |
| 3. | your So numbe Individ | ne last 4 digits of ocial Security or or federal ual Taxpayer cation number | xxx-xx-7365 | |

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Case number (if known)

Debtor 1 O'Neal Oblifias

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|---|--|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and | | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) | | | |
| | doing business as names | EINs | EINs | | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | | |
| | | 11 Clara Ct. Algonquin, IL 60102 Number, Street, City, State & ZIP Code McHenry | Number, Street, City, State & ZIP Code | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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Case number (if known) Debtor 1 O'Neal Oblifias

| •ar | t 2: Tell the Court About | Your B | ankruptcy Ca | ise | | | | |
|---|---|-----------|----------------------------------|-------------------------------------|---|---|--|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Require</i> f page 1 and check the appro | d by 11 U.S.C. § 342(b) for Individual priate box. | 's Filing for Bankruptcy | |
| | choosing to file under | Chapter 7 | | | | | | |
| | | □с | hapter 11 | | | | | |
| | | □с | hapter 12 | | | | | |
| | | □с | hapter 13 | | | | | |
| 3. | How you will pay the fee | • | about how yo | ou may pay. Ty attorney is sub | pically, if you are paying the fo | check with the clerk's office in your lo ee yourself, you may pay with cash, o behalf, your attorney may pay with a | ashier's check, or money | |
| | | | | | tallments. If you choose this ts (Official Form 103A). | option, sign and attach the Application | on for Individuals to Pay | |
| | | | but is not req that applies t | uired to, waive o your family si | your fee, and may do so only ze and you are unable to pay | option only if you are filing for Chapte if your income is less than 150% of the fee in installments). If you choosived (Official Form 103B) and file it with | the official poverty line e this option, you must fill | |
| O. Have you filed for ■ No. bankruptcy within the | | | | | | | | |
| | last 8 years? | □ Y€ | es. | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | - | When | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No |)) | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | es. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | own | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if kno | own | |
| 11. | Do you rent your | | o. Go to I | ine 12. | | | | |
| | residence? | ■ Ye | es. Has yo | our landlord obt | ained an eviction judgment a | gainst you and do you want to stay in | your residence? | |
| | | | | No. Go to line | 12. | | | |
| | | | | Yes. Fill out Inbankruptcy pe | | tion Judgment Against You (Form 10 | 11A) and file it with this | |

Debtor 1 O'Neal Oblifias Document Page 4 of 51 Case number (if known)

| Par | Report About Any Bu | sinesses ' | You Own | as a Sole Proprie | tor | | |
|------|---|---|--|-----------------------|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of bus | siness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Sta | te & ZIP Code | | |
| | it to this petition. | | Checi | k the appropriate bo | x to describe your business: | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines. If you indicate that you are operations, cash-flow statement, and in 11 U.S.C. 1116(1)(B). | | | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement o federal income tax return or if any of these documents do not exist, follow the procedure | | |
| | For a definition of small | ■ No. I am not filing under Chapter 11. | | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bank Code. | | | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code | | |
| Pari | t 4: Report if You Own or | Have Any | Hazardo | ous Property or An | y Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ☐ Yes. | What is | the hazard? | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs | | If immed | liate attention is | | | |
| | immediate attention? | | needed, | why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | | | |
| | - | | | | Number, Street, City, State & Zip Code | | |

Debtor 1 O'Neal Oblifias Document Page 5 of 51

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of: |

Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions about finances. **Disability.** My physical disability causes me to be unable to participate

in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a | briefing about credit |
|--------------------------------|-----------------------|
| counseling because of: | |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-80619 Doc 1 Filed 03/15/16 Entered 03/15/16 17:33:01 Desc Main Document Page 6 of 51

| Der | O'Neal Oblitias | | | Case number | | | | |
|-----|---|--------------------------|--|--|---|--|--|--|
| Par | Answer These Questi | ions for Re | porting Purposes | | | | | |
| 16. | What kind of debts do you have? | | individual primarily for a pers | onsumer debts? Consumer debts are definonal, family, or household purpose." | ned in 11 U.S.C. § 101(8) as "incurred by ar | | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you o | we that are not consumer debts or busines | s debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter | 7. Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | | | Oo you estimate that after any exempt prop will be available to distribute to unsecured | | | | |
| | administrative expenses | | ■ No | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | □ Yes | | | | | |
| 18. | How many Creditors do | ■ 1-49 | | ☐ 1,000-5,000 | ☐ 25,001-50,000 | | | |
| | you estimate that you owe? | ☐ 50-99 | | 5001-10,000 | 5 0,001-100,000 | | | |
| | | □ 100-19 □ 200-99 | | □ 10,001-25,000 | ☐ More than100,000 | | | |
| 19. | How much do you estimate your assets to be worth? | ■ \$0 - \$5 □ \$50,00 | 0,000 1 - \$100,000 | ☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion | | | |
| | be worth: | | 01 - \$500,000 01 - \$1 million | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion | | | |
| 20. | How much do you | \$0 - \$5 | 0,000 | □ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | |
| | estimate your liabilities to be? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion | | | |
| | | | 01 - \$500,000 01 - \$1 million | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion | | | |
| Par | t7: Sign Below | | | | | | | |
| For | you | I have exa | mined this petition, and I dec | clare under penalty of perjury that the inform | nation provided is true and correct. | | | |
| | | | under Chapter 7, 11,12, or 13 of title 11, coose to proceed under Chapter 7. | | | | | |
| | | | | not pay or agree to pay someone who is no e notice required by 11 U.S.C. § 342(b). | t an attorney to help me fill out this | | | |
| | | I request i | elief in accordance with the o | chapter of title 11, United States Code, spe | cified in this petition. | | | |
| | | bankruptc 1519, and | y case can result in fines up t | , concealing property, or obtaining money of to \$250,000, or imprisonment for up to 20 y | | | | |
| | | O'Neal C | | Signature of Debtor | 2 | | | |
| | | Executed | on March 15, 2016 MM / DD / YYYY | Executed on MM | / DD / YYYY | | | |

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Debtor 1 O'Neal Oblifias Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Stephen J. Costello | Date | March 15, 2016 |
|--|---------------|-----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Stephen J. Costello | | |
| Printed name | | |
| Costello & Costello | | |
| Firm name | | |
| 19 N. Western Ave. (RT 31) | | |
| Carpentersville, IL 60110 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 847-428-4544 | Email address | steve@costellolaw.com |
| 6187315 | | |
| Bar number & State | | |

| | mation to identify your | case: | |
|--------------------|--------------------------|-------------------|----------------------------|
| Debtor 1 | O'Neal Oblifias | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name |
| Jnited States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVIS |
| Case number | | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----|--|--------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | . \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | . \$ | 4,450.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 4,450.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities at you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 31,086.29 |
| | Your total liabilities | \$ | 31,086.29 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,343.51 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,975.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | our other so | chedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Vous dabte are primarily consumer dabte. Consumer dabte are those "incurred by an individual primarily for | o porcono | l family or |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 O'Neal Oblifias

| From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$_ | 2,571.51 |
|--|-----|----------|
| | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | im |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Ca | ase 16-80619 | Doc 1 Filed 03/ | | 6 17:33:01 De | sc Main |
|--|--|---|---|---------------------------|---|
| Fill in this infor | mation to identify yo | ur case and this filing: | em Faue 10 01 31 | | |
| Debtor 1 | O'Neal Oblifias | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the | : NORTHERN DISTRICT | Γ OF ILLINOIS, EASTERN DIVISION | | |
| Case number _ | | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 106A/B | | | | |
| Schedul | e A/B: Pro | pertv | | | 12/15 |
| In each category, s it fits best. Be as c more space is need | separately list and descri complete and accurate a ded, attach a separate sl | be items. List an asset only on spossible. If two married peopeet to this form. On the top of | once. If an asset fits in more than one ca ople are filing together, both are equally of of any additional pages, write your name e You Own or Have an Interest In | responsible for supplying | e category where you think correct information. If |
| | · · · · · · · · · · · · · · · · · · · | <u>. </u> | building, land, or similar property? | | |
| ■ No. Go to Par | , , , , | , | | | |
| Yes. Where i | | | | | |
| Part 2: Describe | Your Vehicles | | | | |
| | | | rehicles, whether they are registere dule G: Executory Contracts and Une | | vehicles you own that |
| 3. Cars, vans, tr | rucks, tractors, sport | utility vehicles, motorcyc | cles | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| , | , | | onal vehicles, other vehicles, and a essels, snowmobiles, motorcycle acc | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | | | entries from Part 2, including any e | | \$0.00 |
| Part 3: Describe | Your Personal and Hou | sehold Items | | | |
| Do you own or | have any legal or eqા | iitable interest in any of t | he following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Examples: Ma ☐ No | | re, linens, china, kitchenwa | are | | |
| Yes. Desc | | e, Furnishings and Su | ıpplies | | \$2,000.00 |
| 7. Electronics | | | | | |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

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Case number (if known) Document O'Neal Oblifias Debtor 1

| | Television, misc electronics, CDs DVDs | \$250.00 |
|----|--|---|
| 8. | Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; state other collections, memorabilia, collectibles ■ No □ Yes. Describe | mp, coin, or baseball card collections; |
| 9. | Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; musical instruments ■ No □ Yes. Describe | canoes and kayaks; carpentry tools; |
| 10 | Firearms | |
| 11 | . Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Necessary Wearing Apparel | \$200.00 |
| | Jewelry | , gems, gold, silver |
| 14 | Any other personal and household items you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list. | ot list |
| 1 | 5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attact for Part 3. Write that number here | \$2,450.00 |
| | Describe Your Financial Assets o you own or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16 | Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your No | our petition |
| 17 | Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, bruinstitutions. If you have multiple accounts with the same institution, list each. | okerage houses, and other similar |
| | ■ No □ Yes Institution name: | |

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Case number (if known) Debtor 1 O'Neal Oblifias 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... % of ownership: Name of entity: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401K \$2,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you Nο ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 3

Case 16-80619 Doc 1 Filed 03/15/16 Entered 03/15/16 17:33:01 Desc Main Page 13 of 51 Document Case number (if known) O'Neal Oblifias Debtor 1 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,000.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions.

Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Case 16-80619 Doc 1 Filed 03/15/16 Entered 03/15/16 17:33:01 Desc Main Page 14 of 51
Case number (if known) Document O'Neal Oblifias Debtor 1 Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$2,450.00

\$2,000.00

\$4,450.00

\$0.00

\$0.00

\$0.00

Copy personal property total

63. **Total of all property on Schedule A/B**. Add line 55 + line 62

Part 4: Total financial assets, line 36

Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

60. Part 6: Total farm- and fishing-related property, line 52

Total personal property. Add lines 56 through 61...

\$4,450.00

\$4,450.00

Official Form 106A/B Schedule A/B: Property page 5

| | | | Document | | Page 15 of 51 | | |
|--|--|--|---|---|---|---|-----------|
| Fil | I in this inform | nation to identify your o | | | | | |
| De | ebtor 1 | O'Neal Oblifias | | | | | |
| | | First Name | Middle Name | La | ast Name | | |
| | ebtor 2 ouse if, filing) | First Name | Middle Name | La | ast Name | | |
| l In | sited States Per | okruptov Court for the | NORTHERN DISTRICT OF | II I INK | OIS EASTEDNI DIVISION | | |
| UII | illeu States Dai | nkruptcy Court for the: | NORTHERN DISTRICT OF | ILLIIN | OIS, LASTERN DIVISION | | |
| | ase number known) | | | | | ☐ Check if this is an amended filing | |
| | | | | | | | |
| O ₁ | fficial For | rm 106C | | | | | |
| S | chedule | e C: The Pro | perty You Cla | aim | as Exempt | 12/ | /15 |
| the nee and For spe any | property you liseded, fill out and case number (reach item of pecific dollar and applicable stated | sted on Schedule A/B: P.d attach to this page as r (if known). property you claim as enount as exempt. Alterratutory limit. Some exenlimited in dollar amount articular dollar amount | roperty (Official Form 106A/B many copies of Part 2: Addition exempt, you must specify the natively, you may claim the mptions—such as those fount. However, if you claim and | ne amo full fai r healt n exen | our source, list the property that you age as necessary. On the top of an ount of the exemption you claim. If market value of the property but haids, rights to receive certain on the property of the property of the aids, rights to receive certain on the property of the property of the property but haids, rights to receive certain on the property of the property of the property but haids, rights to receive certain on the property of the property that you say that you have a property that you say that you have a property that you say that you say the property that you say that you say that you say the property that you say that you say that you say the property that you say | for supplying correct information. Usi u claim as exempt. If more space is y additional pages, write your name. One way of doing so is to state a eing exempted up to the amount of benefits, and tax-exempt retiremelue under a law that limits the int, your exemption would be limited. | of ent |
| exe to t Pa | the applicable | statutory amount. y the Property You Clai exemptions are you cla | • | en if vo | our spouse is filing with you. | | _ |
| exe to t Pa | the applicable Int 1: Identify Which set of | y the Property You Clai | aiming? Check one only, eve | • | , , , | | _ |
| exe to t Pa | the applicable Int 1: Identify Which set of You are cla | y the Property You Clai exemptions are you claining state and federal | aiming? Check one only, even | • | , , , | | |
| exe to t Pa | the applicable Int 1: Identify Which set of You are cla | y the Property You Clai exemptions are you claining state and federal | aiming? Check one only, eve | • | , , , | | |
| Pa 1. | the applicable Int 1: Identify Which set of You are cla | y the Property You Clain exemptions are you clain aiming state and federal caiming federal exemption | aiming? Check one only, even nonbankruptcy exemptions. as. 11 U.S.C. § 522(b)(2) | 11 U.S | , , , | | |
| Pa 1. | which set of You are cla For any prop Brief description | y the Property You Clain exemptions are you clain aiming state and federal caiming federal exemption | aiming? Check one only, even nonbankruptcy exemptions. is. 11 U.S.C. § 522(b)(2) Ile A/B that you claim as exon Current value of the portion you own | 11 U.S empt, | S.C. § 522(b)(3) fill in the information below. punt of the exemption you claim | Specific laws that allow exemption | |
| Pa 1. | which set of You are cla For any prop Brief description | y the Property You Clair exemptions are you claiming state and federal eximing federal exemption erty you list on Schedulin of the property and line | aiming? Check one only, even nonbankruptcy exemptions. is. 11 U.S.C. § 522(b)(2) when A/B that you claim as extended to the control of the second control | 11 U.S empt, | S.C. § 522(b)(3) fill in the information below. | Specific laws that allow exemption | |
| Pa 1. | which set of You are cla For any prop Brief descriptic Schedule A/B t | exemptions are you claiming state and federal eximing federal exemption erty you list on Schedular on of the property and line that lists this property | aiming? Check one only, even nonbankruptcy exemptions. Is. 11 U.S.C. § 522(b)(2) Ille A/B that you claim as exemption on Current value of the portion you own Copy the value from Schedule A/B | 11 U.S empt, | S.C. § 522(b)(3) fill in the information below. punt of the exemption you claim | Specific laws that allow exemption 735 ILCS 5/12-1001(b) | |
| Pa 1. | which set of You are cla For any prop Brief descriptic Schedule A/B t | y the Property You Clair exemptions are you claiming state and federal eximing federal exemption erty you list on Schedulin of the property and line that lists this property | aiming? Check one only, even nonbankruptcy exemptions. as. 11 U.S.C. § 522(b)(2) Ale A/B that you claim as exion Current value of the portion you own Copy the value from Schedule A/B | 11 U.S empt, | fill in the information below. bunt of the exemption you claim ck only one box for each exemption. | | |
| Pa 1. | which set of You are cla For any prop Brief description Schedule A/B t Furniture, F Line from Sch | exemptions are you claiming state and federal eximing federal exemption erty you list on Schedular on of the property and line that lists this property | aiming? Check one only, even nonbankruptcy exemptions. as. 11 U.S.C. § 522(b)(2) Ale A/B that you claim as exion Current value of the portion you own Copy the value from Schedule A/B plies \$2,000.00 | 11 U.S empt, Amo | fill in the information below. count of the exemption you claim ck only one box for each exemption. \$2,000.00 100% of fair market value, up to | | |
| Pa 1. | which set of You are cla For any prop Brief description Schedule A/B t Television, DVDs | exemptions are you claiming state and federal eximing federal exemption erty you list on Schedular on of the property and line that lists this property Furnishings and Supple dedule A/B: 6.1 | aiming? Check one only, even nonbankruptcy exemptions. as. 11 U.S.C. § 522(b)(2) Ale A/B that you claim as exion Current value of the portion you own Copy the value from Schedule A/B plies \$2,000.00 | 11 U.S empt, Amo | fill in the information below. bunt of the exemption you claim ck only one box for each exemption. \$2,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | |
| Pa 1. | which set of You are cla For any prop Brief description Schedule A/B t Television, DVDs Line from Schedule Schedule Schedule Line from Schedule Sc | exemptions are you claiming state and federal eximing federal exemption erty you list on <i>Schedu</i> on of the property and line that lists this property Furnishings and Suppledule A/B: 6.1 | aiming? Check one only, even nonbankruptcy exemptions. as. 11 U.S.C. § 522(b)(2) Ale A/B that you claim as exion Current value of the portion you own Copy the value from Schedule A/B plies \$2,000.00 | empt, Amc | fill in the information below. bunt of the exemption you claim ck only one box for each exemption. \$2,000.00 100% of fair market value, up to any applicable statutory limit \$250.00 100% of fair market value, up to | 735 ILCS 5/12-1001(b) | |
| Pa 1. | which set of You are cla For any prop Brief description Schedule A/B t Television, DVDs Line from Schedule Schedule Schedule Line from Schedule Sc | exemptions are you claiming state and federal eximing federal exemption erty you list on <i>Schedu</i> on of the property and line that lists this property Furnishings and Suppledule A/B: 6.1 misc electronics, CE medule A/B: 7.1 | aiming? Check one only, even nonbankruptcy exemptions. as. 11 U.S.C. § 522(b)(2) Ale A/B that you claim as eximate on Current value of the portion you own Copy the value from Schedule A/B Polies \$2,000.00 | empt, Amc | fill in the information below. Sound of the exemption you claim Sound one box for each exemption. \$2,000.00 100% of fair market value, up to any applicable statutory limit \$250.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b) | |
| Pa 1. | the applicable of the applicab | exemptions are you claiming state and federal eximing federal exemption erty you list on <i>Schedu</i> on of the property and line that lists this property Furnishings and Suppledule A/B: 6.1 misc electronics, CE medule A/B: 7.1 | aiming? Check one only, even nonbankruptcy exemptions. as. 11 U.S.C. § 522(b)(2) Ale A/B that you claim as eximate on Current value of the portion you own Copy the value from Schedule A/B Polies \$2,000.00 | empt, Amc | fill in the information below. Sunt of the exemption you claim ck only one box for each exemption. \$2,000.00 100% of fair market value, up to any applicable statutory limit \$250.00 100% of fair market value, up to any applicable statutory limit \$200.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b) | |

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

No

Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

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Debtor 1 O'Neal Oblifias

| | | BOOTH | 111 1 11111 11 11 11 11 | | |
|---|--------------------------|-------------------|------------------------------|--|--|
| Fill in this information to identify your case: | | | | | |
| Debtor 1 | O'Neal Oblifias | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISIO | | |
| Case number | | | | | |
| (if known) | | | | | |
| | | | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | Case 10-00019 D | Document | Page 1 | 8 of 51 | .55.01 Des | oc main |
|--|--|--|--|--|---|--|
| Fill in t | his information to identify your o | | 1 111111 1 | | | |
| Debtor | 1 O'Neal Oblifias First Name | Middle Name | Last Name | | _ | |
| Debtor | | | | | _ | |
| (Spouse if | f, filing) First Name | Middle Name | Last Name | | | |
| United \$ | States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS, EAS | TERN DIVISION | _ | |
| Case no | umber | | | | _ | theck if this is an mended filing |
| Sche | al Form 106E/F dule E/F: Creditors W | | | | | 12/15 |
| ny exec Schedule D: Credit he Conti | mplete and accurate as possible. Use utory contracts or unexpired leases the G: Executory Contracts and Unexpirors Who Have Claims Secured by Pro nuation Page to this page. If you have if known). List All of Your PRIORITY Uns | nat could result in a claim. Also list ed Leases (Official Form 106G). Do perty. If more space is needed, copen in a Part, | executory co not include a by the Part you | ntracts on Schedule A/ ny creditors with partia ı need, fill it out, numbe | B: Property (Official I Illy secured claims the er the entries in the b | Form 106A/B) and on at are listed in Schedule oxes on the left. Attach |
| | any creditors have priority unsecured | | | | | |
| _ | No. Go to Part 2. | olalino againot you. | | | | |
| _ · | | | | | | |
| Part 2: | | Y Unsecured Claims | | | | |
| 3. Do a | any creditors have nonpriority unsecu | red claims against you? | | | | |
| | No. You have nothing to report in this par | rt. Submit this form to the court with yo | our other sched | dules. | | |
| | es. | · | | | | |
| clain | all of your nonpriority unsecured clain, list the creditor separately for each claitor holds a particular claim, list the other | im. For each claim listed, identify wha | at type of claim | it is. Do not list claims al | Iready included in Part | 1. If more than one on Page of Part 2. |
| | A/D 0 | | | | | Total claim |
| 4.1 | A/R Concepts, Inc. Nonpriority Creditor's Name | Last 4 digits of acco | unt number | 0923 | | \$65.00 |
| | 33 W. Higgins Rd. Suite 715 | When was the debt i | incurred? | 2013 | | - |
| | Barrington, IL 60010 | | | | | |
| - | Number Street City State Zlp Code | As of the date you fi | le, the claim is | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | ☐ Disputed | | | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORI | TY unsecured | claim: | | |
| | At least one of the debtors and anot | - Student loans | | | | |
| | ☐ Check if this claim is for a comm Is the claim subject to offset? | report as priority clain | าร | ration agreement or divo | | |
| | ■ No | ☐ Debts to pension of | or profit-sharing | g plans, and other similar | r debts | |
| | □Yes | Other Specify | Services Vi | illage of South Ba | rrington | |

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Case number (if know)

| Debioi | O Neal Obillias | | Case Humber (II know) | |
|--------|---|--|--|----------|
| 4.2 | CITY OF CHICAGO | Last 4 digits of account number | 9940 | \$566.00 |
| | Nonpriority Creditor's Name DEPT. OF REVENUE PO BOX 88292 | When was the debt incurred? | 2008-2009 | |
| | CHICAGO, IL 60680-1292 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent ☐ Unliquidated ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured Student loans | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharin ☐ Other. Specify | g plans, and otner similar debts | |
| 4.3 | Comcast Nonpriority Creditor's Name | Last 4 digits of account number | | \$565.00 |
| | P O Box 3002 Southeastern, Pa 19398-3002 | When was the debt incurred? | 2002 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent ☐ Unliquidated | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecurer | l claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify services | | |
| 4.4 | ComEd Nonpriority Creditor's Name | Last 4 digits of account number | | \$500.00 |
| | Bill Payment Center Chicago, IL 60668 | When was the debt incurred? | 2003 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | ☐ At least one of the debtors and another | Student loans | . VIGITI | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □Yes | Other Specify Services | | |

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Case number (if know)

| Debio | O Neal Obillias | | Case Humber (ii know) | |
|-------|---|--|---|------------|
| 4.5 | Discover | Last 4 digits of account number | | \$2,800.00 |
| | Nonpriority Creditor's Name PO Box 30395 | When was the debt incurred? | 2005 | |
| | Salt Lake City, UT 84130 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | ed claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sep report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | |
| | Yes | Other. Specify Charges | | |
| 4.6 | First Financial Asset Management, I | Last 4 digits of account number | 9998 | \$0.00 |
| | Nonpriority Creditor's Name 3091 Governors Lake Dr, Suite 500 Peachtree Corners, GA 30071 | When was the debt incurred? | 4/24/2015 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | По и | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | ad claim: | |
| | ☐ At least one of the debtors and another | Student loans | cu Ciaiiii. | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | |
| | Yes | Other Specify notice pur | poses | |
| 4.7 | First National Collections Bureau | Last 4 digits of account number | 6687 | \$2,393.29 |
| | Nonpriority Creditor's Name | | | |
| | 610 Waltham Way Sparks, NV 89434 | When was the debt incurred? | 2014 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | По :: . | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | ad claim: | |
| | ☐ At least one of the debtors and another | Student loans | eu Ciaiiii. | |
| | ☐ Check if this claim is for a community debt | _ | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | |
| | □Yes | | Credit One/LVNV Funding | |
| | | — Outlot. Opcomy | | |

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Case number (if know)

| Debioi | O Neal Obillias | | Case Humber (II know) | |
|--------|--|---|--|------------|
| 4.8 | Illinois Department of Transportati | Last 4 digits of account number | 9966 | \$0.00 |
| | Nonpriority Creditor's Name Division of Traffic safety 1340 North 9th Street | When was the debt incurred? | 4/24/2015 | |
| | Springfield, IL 62766 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify notice purp | ooses | |
| | Illinois Farmers Insurance | | | |
| 4.9 | Company | Last 4 digits of account number | 5445 | \$5,817.36 |
| | Nonpriority Creditor's Name c/o Walsh & Townsend, Ltd. 205 West Randolph, Suite 1000 | When was the debt incurred? | 4/24/2015 | |
| | Chicago, IL 60606 Number Street City State Zlp Code | As of the date you file, the claim i | s. Chack all that apply | |
| | Who incurred the debt? Check one. | <u></u> | S. Oncor all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | | |
| | Yes | Other. Specify car accide | nt | |
| 4.10 | Illinois Tollway Authority Nonpriority Creditor's Name | Last 4 digits of account number | | \$800.00 |
| | Attn:Collection-Legal Dept | When was the debt incurred? | 2014 | |
| | PO Box 5201 | | | |
| | Lisle, IL 60532-5201 | A | Objects all the standing | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Cneck all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | <u> </u> | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify fines | | |

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Debtor 1 O'Neal Oblifias Case number (if know) 4.11 Kenneth R. Myers Last 4 digits of account number \$9,735.00 Nonpriority Creditor's Name 106 Woody Way When was the debt incurred? 4/24/2015 Oakwood Hills, IL 60013 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Car Accident ☐ Yes 4.12 **Matt Khorsand** Last 4 digits of account number \$5,560.00 Nonpriority Creditor's Name 9 Pacer Tri When was the debt incurred? 4/24/2015 Barrington, IL 60010 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Car accident 4.13 **Nicor Gas** 4898 Last 4 digits of account number \$759.57 Nonpriority Creditor's Name P O Box 0632 When was the debt incurred? 2015 Aurora, IL 60507 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Services

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Debtor 1 O'Neal Oblifias Case number (if know) 4.14 Office of Secretary of State Last 4 digits of account number 2015 \$0.00 Nonpriority Creditor's Name **Financial Resonsibility Section** When was the debt incurred? 4/24/2015 2701 South Dirksen Parkway Springfield, IL 62723 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice purposes ☐ Yes 4.15 **Receivables Performance** 0449 \$604.07 Last 4 digits of account number Nonpriority Creditor's Name 20816 44th Avenue W When was the debt incurred? 2014 Lynnwood, WA 98036 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Services Direct TV ☐ Yes 4.16 **Receivables Performance Mgmt** \$604.00 Last 4 digits of account number 1037 Nonpriority Creditor's Name Opened 9/01/15 Attn: Bankruptcy When was the debt incurred? Po Box 1548 Lynnwood, WA 98036 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only □ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Directv ☐ Yes

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Case number (if know)

| Debioi | O Neal Obillias | | Case Humber (ii know) | |
|--------|---|--|---|----------|
| 4.17 | Stellar Recovery Inc | Last 4 digits of account number | 9931 | \$205.00 |
| | Nonpriority Creditor's Name 1327 Hwy 2 W | When was the debt incurred? | Opened 2/01/11 | |
| | Suite 100 Kalispell, MT 59901 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection | Attorney Comcast | |
| 4.18 | Unique National Collections | Last 4 digits of account number | 3361 | \$43.00 |
| | Nonpriority Creditor's Name 119 East Maple St. Jeffersonville, IN 47130 | When was the debt incurred? | 2014 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | Continuent | | |
| | ■ Debtor 1 only | ☐ Contingent ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify Poplar Cre | ek Library District | |
| 4.19 | Unique National Collections | Last 4 digits of account number | 5966 | \$26.00 |
| | Nonpriority Creditor's Name | | Opened 5/01/12 Last Active | |
| | 119 E Maple St Jeffersonville, IN 47130 | When was the debt incurred? | 5/16/12 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | □Yes | Other. Specify Collection Library | Attorney Algonquin Area Public | |

| Debtor 1 | O'Neal Ol | olifias | Document Page 2 | Case n | number (if know) | | |
|--|---|--|--|-------------|--|-----------------------|--------------------|
| | | ional Collections | Last 4 digits of account number | 8806 | <u>; </u> | | \$43.00 |
| | Nonpriority Cred | e St | When was the debt incurred? | Oper | ned 11/01/13 | | |
| 1 | Number Street (| Ile, IN 47130 City State Zlp Code he debt? Check one. | As of the date you file, the claim i | s: Check | all that apply | | |
| - | ■ Debtor 1 onl | | ☐ Contingent | | | | |
| | Debtor 2 onl | • | ☐ Unliquidated | | | | |
| | Debtor 1 and | • | ☐ Disputed | | | | |
| | | • | Type of NONPRIORITY unsecured | l claim: | | | |
| | _ | of the debtors and another | ☐ Student loans | | | | |
| | | s claim is for a community debt bject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agi | reement or divorce that | you did not | |
| I | No | | Debts to pension or profit-sharin | g plans, a | and other similar debts | | |
| I | ☐ Yes | | Other. Specify Collection Library | Attorn | ey Poplar Creek | Public | |
| Part 3: | List Others | s to Be Notified About a Debt | That You Already Listed | | | | |
| any dek Name and Village Police 30 Sou | ots in Parts 1 o d Address of South B Department th Barringto | r 2, do not fill out or submit this pa On arrington Lin t on Rd. | which entry in Part 1 or Part 2 did you e 4.1 of (<i>Check one</i>): | list the or | • | Jnsecured Claims | to be notined for |
| Ваггіпд | jton, IL 600 | | st 4 digits of account number | 09 | 923 | | |
| Part 4: | Add the Ar | mounts for Each Type of Unse | cured Claim | | | | |
| | e amounts of cured claim. | certain types of unsecured claims. | This information is for statistical rep | porting p | ourposes only. 28 U.S. | C. §159. Add the amou | ınts for each type |
| | | | | | Total claim | | |
| | 6a. | Domestic support obligations | | 6a. | \$ | 0.00 | |
| Total clai | | Taxes and certain other debts yo | ou owe the government | 6b. | \$ | 0.00 | |
| | 6c. | Claims for death or personal inju | - | 6c. | \$ | 0.00 | |
| | 6d. | Other. Add all other priority unsecu | ired claims. Write that amount here. | 6d. | \$ | 0.00 | |
| | 6e. | Total. Add lines 6a through 6d. | | 6e. | \$ | 0.00 | |
| | 6f. | Student loans | | 6f. | Total Claim | 0.00 | |
| Total clai from Pa | ms | | ration agreement or divorce that you | | \$ | 0.00 | |

6j.

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.

Total. Add lines 6f through 6i.

0.00

31,086.29

31,086.29

| Fill in this info | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|----------------------------|-----|
| Debtor 1 | O'Neal Oblifias | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVIS | ION |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number, | whom you have the Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|----------------------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| | | | | | |

| | | Docume | ent Page 27 o | of 51 |
|------------------------------|---|---------------------------|----------------------------|--|
| Fill in this | information to identify your | case: | | |
| Debtor 1 | O'Neal Oblifias | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, fili | ng) First Name | Middle Name | Last Name | |
| (Spouse II, IIII | ng) First Name | Middle Name | Last Name | |
| United Sta | ites Bankruptcy Court for the: | NORTHERN DISTRIC | Γ OF ILLINOIS, EASTER | RN DIVISION |
| Case num | ber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Officia | l Form 106H | | | |
| | | | | |
| Sched | lule H: Your Cod | lebtors | | 12/15 |
| ■ No □ Yes 2. Wit | hin the last 8 years, have yo | u lived in a community p | property state or territor | ry? (Community property states and territories include |
| ■ No. | na, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo | | | ington, and wisconsin.) |
| in line Form fill ou | e 2 again as a codebtor only 106D), Schedule E/F (Officia t Column 2. | if that person is a guara | ntor or cosigner. Make | r if your spouse is filing with you. List the person shows sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| | | | | _ |
| 3.1 | Name | | | Schedule D, line |
| | reame | | | ☐ Schedule E/F, line |
| _ | | | | |
| | Number Street | Stato | ZIP Code | |
| | City | State | ZIP Code | |
| | | | | _ |
| 3.2 | Nome | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | _ | | _ |
| | City | State | ZIP Code | |

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| Fill | in this information to identify your | case: | | | | | | | |
|--------------------|--|--|---|--------------------|---------------|---------------------------------------|---------------------------|------------------------------------|-------------------|
| Del | otor 1 O'Neal Obl | ifias | | | | | | | |
| | otor 2 ouse, if filing) | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for th | e: NORTHERN DISTRIC | CT OF ILLINOIS, EAS | STERN | _ | | | | |
| | se number | | - | | | | ded filing nent showi | ng postpetition following date: | |
| 0 | fficial Form 106l | | | | | MM / DD/ | YYYY | | |
| S | chedule I: Your Ind | ome | | | | | | | 12/15 |
| sup spo atta | as complete and accurate as posphyling correct information. If you use. If you are separated and you have a separate sheet to this form Describe Employment | u are married and not fili ur spouse is not filing w . On the top of any addit | ing jointly, and your vith you, do not inclu | spouse de infor | is li mati | ving with you, in ion about your s | clude info pouse. If n | rmation abou nore space is | t your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor | 2 or non-f | filing spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | ☐ Em | oloyed | | |
| | attach a separate page with information about additional | _mproyment elutue | □ Not employed | | | ☐ Not | employed | | |
| | employers. | Occupation | Supervisor | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Costco | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 680 S Rand Roa Lake Zurich, IL | ıd | | | | | |
| | | How long employed t | there? 3 years | | | | | | |
| Par | t 2: Give Details About Mo | onthly Income | | | | | | | |
| | mate monthly income as of the use unless you are separated. | date you file this form. If | you have nothing to r | eport for | any | line, write \$0 in t | ne space. I | nclude your no | on-filing |
| | u or your non-filing spouse have n e space, attach a separate sheet t | | combine the information | n for all | emp | loyers for that pe | son on the | lines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or ling spouse | |
| 2. | List monthly gross wages, sal deductions). If not paid monthly | | | 2. | \$ | 2,571.51 | \$ | N/A | |
| 3. | Estimate and list monthly ove | rtime pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add | line 2 + line 3. | | 4. | \$ | 2,571.51 | \$_ | N/A | |

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| Deb | tor 1 | O'Neal Oblifias | | Cas | e number (if known) | | | |
|-----|------------|--|-------------|----------|---------------------|---------------|-------------------------------|---------|
| | | | | | | | | |
| | | | | Fo | or Debtor 1 | | Debtor 2 or -filing spouse | |
| | Cop | y line 4 here | 4. | \$ | 2,571.51 | \$ | N/A | |
| E | l int | | | | | | | |
| 5. | | all payroll deductions: | - - | Φ | 504.00 | æ | NI/A | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a. 5b. | \$ \$ | 524.00 0.00 | \$_ \$ | N/A N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$ | 98.00 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$_ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: health spend | 5h.+ | \$ \$ | 15.00 | + \$ | N/A N/A | |
| | | Life Ins Disability | | φ_ \$ | 525.00 42.00 | \$ | N/A N/A | |
| | | United Way | | \$ | 24.00 | \$ | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | —— 6. | \$ | 1,228.00 | \$ | N/A | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 1,343.51 | \$ | N/A | |
| | | | • • | Ψ- | 1,040.01 | Ψ | | |
| 8. | 8a. | all other income regularly received: Net income from rental property and from operating a business, | | | | | | |
| | | profession, or farm | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | nt | | | | | |
| | | regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| | | settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan | 200 | | | | | |
| | | that you receive, such as food stamps (benefits under the Supplemental | ice | | | | | |
| | | Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | 0 | Specify: | 8f. | \$_ | 0.00 | \$ | N/A | |
| | 8g. 8h. | Pension or retirement income Other monthly income. Specify: | 8g. 8h.+ | \$ • | 0.00 | , \$ _ | N/A N/A | |
| | OH. | Other monthly income. Specify. | | Ψ_ | 0.00 | ΤΨ_ | NA | |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | |
| | | | L | | | | | |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. \$ | | 1,343.51 + \$ | | N/A = \$ 1 | ,343.51 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | | | |
| 11. | | te all other regular contributions to the expenses that you list in Schedu | | | | | | |
| | | ude contributions from an unmarried partner, members of your household, your friends or relatives. | our depen | dent | ts, your roommate | s, and | | |
| | | not include any amounts already included in lines 2-10 or amounts that are no | ot availab | le to | pav expenses lis | ted in S | Schedule J. | |
| | Spe | | | | | | 11. +\$ | 0.00 |
| | | | | | | | | |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rete that amount on the Summary of Schedules and Statistical Summary of Center of the Summary of Schedules and Statistical Summary of Center of the Summary of Center of the Summary of Schedules and Statistical Summary of Center of the Summary of Schedules and Statistical Schedules and Schedu | | | | | • | |
| | app | , | rtairi Elab | ,,,,,, | o ana redated Dai | u, ii it | 12. \$ 1 | ,343.51 |
| | | | | | | | Combined | d d |
| | | | _ | | | | monthly i | |
| 13. | | you expect an increase or decrease within the year after you file this for | m? | | | | | |
| | | No. Yes. Explain: | | | | | | |
| | | i oo. Explain. | | | | | | |

| Fill | in this information to identify yo | our case: | | | | |
|------|---|--|---|----------------------------------|--|---|
| Deb | O'Neal Oblifi | as | | Che | eck if this is: An amended filing | |
| 1 | otor 2 ouse, if filing) | | | | | wing postpetition chapter the following date: |
| (Spi | ouse, ii iiiirig) | | | | 13 expenses as or | the following date. |
| Unit | ted States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLIN EASTERN DIVISION | IOIS, | | MM / DD / YYYY | |
| 1 | se number nown) | | | | | |
| | fficial Form 106J | | | | | |
| | chedule J: Your I | • | | | | 12/1 |
| info | | | | | | |
| 1. | Is this a joint case? | | | | | |
| | ■ No. Go to line 2. □ Yes. Does Debtor 2 live in | in a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 mus | st file Official Form 106J-2, <i>Expense</i> | s for Separate House | ehold of De | ebtor 2. | |
| 2. | Do you have dependents? | □ No | | | | |
| | Do not list Debtor 1 and Debtor 2. | ■ Yes. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the dependents names. | | son | | 2 | □ No ■ Yes |
| | | | son | | 4 | □ No ■ Yes □ No |
| | | | son | | 13 | ■ Yes |
| 3. | Do your expenses include expenses of people other the yourself and your dependent | | | | | ☐ Yes |
| exp | timate your expenses as of yo | ng Monthly Expenses our bankruptcy filing date unless y pankruptcy is filed. If this is a supp | you are using this for plemental Schedule | orm as a s e <i>J</i> , check | supplement in a Ch the box at the top | apter 13 case to report of the form and fill in the |
| the | | non-cash government assistance in description of the description of th | | | Your exp | enses |
| 4. | The rental or home owners payments and any rent for the | hip expenses for your residence. I e ground or lot. | Include first mortgag | e 4. | \$ | 650.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. | \$ | 0.00 |
| | 4b. Property, homeowner's | s, or renter's insurance | | 4b. | · | 0.00 |
| | | pair, and upkeep expenses | | 4c. | \$ | 50.00 |
| _ | | ion or condominium dues ents for your residence, such as ho | and a substitute to the con- | 4d. 5. | · | 0.00 |
| 5. | AUUHUUHAI IHOHUADE DAVME | ans for your residence, slich as ho | THE POURTY IDANS | כ | .n | () ()() |

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| Deb | tor 1 | O'Neal C | blifias | Case nu | mb | oer (if known) | |
|-----|----------------|------------------------------|--|--|---------|-------------------|--------------------------|
| • | 11411141 | | | | | | |
| 6. | Utiliti 6a. | | heat, natural gas | 68 | | ¢ | 0.00 |
| | 6b. | - | wer, garbage collection | 6b | | | |
| | | - | | | | | 0.00 |
| | 6c. | • | e, cell phone, Internet, satellite, and cable services | |). J | · | 150.00 |
| - | 6d. | Other. Spe | | | d. | | 0.00 |
| 7. | | | ekeeping supplies | | 7. | \$ | 600.00 |
| 8. | | | children's education costs | | 3. | \$ | 0.00 |
| 9. | | _ | ry, and dry cleaning | | | \$ | 125.00 |
| | | | roducts and services | |). | : | 100.00 |
| 11. | | | ntal expenses | 11 | ۱. | \$ | 0.00 |
| 12. | | | Include gas, maintenance, bus or train fare. | 13 | 2. | ¢ | 160.00 |
| 12 | | | ar payments. | | | · | |
| | | | clubs, recreation, newspapers, magazines, and | | | \$ | 0.00 |
| | | | ributions and religious donations | 14 | ₽. | \$ | 40.00 |
| 15. | | rance. | courses and destroy from your pay or included in line | 22 4 ar 20 | | | |
| | | ot include ir Life insura | surance deducted from your pay or included in line | es 4 or 20. 15a | | ¢ | 0.00 |
| | | Health ins | | 15a | | · | 0.00 |
| | | | | | | | 0.00 |
| | | Vehicle in | | 150 | | · | 100.00 |
| | | | Irance. Specify: | 150 | ٦. | \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or included in | | | Φ. | 0.00 |
| 4- | Speci | • | | 16 | ο. | \$ | 0.00 |
| 17. | | | ease payments: ents for Vehicle 1 | 176 | | ¢ | 0.00 |
| | | | | 178 | | | 0.00 |
| | | | ents for Vehicle 2 | 17t | | · | 0.00 |
| | | Other. Spe | - | 170 | | | 0.00 |
| | | Other. Spe | • | 170 | d. | \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you | | 3. | \$ | 0.00 |
| 10 | | | your pay on line 5, <i>Schedule I, Your Income</i> (Of s you make to support others who do not live w | 1101ai 1 01111 1001j. | ٠. | \$ | |
| 19. | | | s you make to support others who do not live w | | , | Φ | 0.00 |
| 20 | Speci | · | orty ayronges not included in lines 4 or F of thi | 19 | | aur Incomo | |
| 20. | | | erty expenses not included in lines 4 or 5 of this on other property | s form or on <i>schedule i:</i> 20a | | | 0.00 |
| | | | | 20t | | · | _ |
| | | Real estat | | | | · | 0.00 |
| | | | nomeowner's, or renter's insurance | 200 | | | 0.00 |
| | | | ice, repair, and upkeep expenses | 200 | | · | 0.00 |
| | | | er's association or condominium dues | 20€ | | · | 0.00 |
| 21. | Othe | r: Specify: | | 21 | ۱. ِ | +\$ | 0.00 |
| 22 | Calcı | ulate vour | monthly expenses | | | | |
| 22. | | - | through 21. | | | \$ | 1,975.00 |
| | | | 2 (monthly expenses for Debtor 2), if any, from Off | icial Form 106 L 2 | | \$ | 1,975.00 |
| | | | | Iciai F0111 1005-2 | | l : ———— | |
| | 22c. / | Add line 22 | a and 22b. The result is your monthly expenses. | | | \$ | 1,975.00 |
| 23. | Calcu | ulate vour | monthly net income. | | L | | |
| _5. | | - | 12 (your combined monthly income) from Schedule | e I. 23a | a. | \$ | 1,343.51 |
| | | | monthly expenses from line 22c above. | 23b | | · | 1,975.00 |
| | 200. | Jopy your | Oxportoco il oli ililo 220 abovo. | 200 | ٠. | | 1,575.00 |
| | 23c. | Subtract v | our monthly expenses from your monthly income. | | | | |
| | | | is your monthly net income. | 230 | э. | \$ | -631.49 |
| | | | - , | | | | |
| 24. | Do yo | ou expect a | an increase or decrease in your expenses withi | n the year after you file th | nis | form? | |
| | | | u expect to finish paying for your car loan within the year o | do you expect your mortgage | pay | yment to increase | or decrease because of a |
| | | | terms of your mortgage? | | | | |
| | ■ No | | | | | | |
| | ☐ Ye | es. | Explain here: | | | | |

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| Debtor 1 | O'Neal Oblifia | S | | |
|---------------------|-----------------------|-----------------------|-------------------------------|--------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| Jnited States Ba | nkruptcy Court for th | ne: NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISION | |
| Case number _ | | | | |
| (if known) | | | | ☐ Check if this is ar amended filing |

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| | Sign Below | | | | | | | | |
|-----|---|---|--|--|--|--|--|--|--|
| Dic | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | | |
| | No | | | | | | | | |
| | Yes. Name of person | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | | |
| | der penalty of perjury, I declare that I have read the summary a they are true and correct. | ınd s | chedules filed with this declaration and | | | | | | |
| X | /s/ O'Neal Oblifias | X | | | | | | | |
| | O'Neal Oblifias | | Signature of Debtor 2 | | | | | | |
| | Signature of Debtor 1 | | | | | | | | |
| | Date March 15, 2016 | | Date | | | | | | |

Official Form 106Dec

12/15

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| | 4 | | | | | | | | | |
|-------------------------|---|--|--|---|--|---|--|--|--|--|
| | | nation to identify you | r case: | | | | | | | |
| Debto | or 1 | O'Neal Oblifias First Name | Middle Name | Last Name | | | | | | |
| Debto | | | | | | | | | | |
| (Spouse | e if, filing) | First Name | Middle Name | Last Name | | | | | | |
| United | d States Ba | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS, EASTERN DIV | ISION | | | | | |
| Case (if know | number _ | | | | _ | Check if this is an mended filing | | | | |
| Stat Be as inform | complete a | and accurate as possi fore space is needed, | attach a separate sheet to | are filing together, both are | ankruptcy equally responsible for sup y additional pages, write yo | | | | | |
| Part 1 | | n). Answer every ques Details About Your Ma | stion. arital Status and Where You | ı Lived Before | | | | | | |
| 1. W | /hat is you | r current marital statu | ıs? | | | | | | | |
| | MarriedNot mar | ried | | | | | | | | |
| 2. D | Ouring the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | |
| | ■ No] Yes. Lis | t all of the places you l | lived in the last 3 years. Do no | ot include where you live nov | v. | | | | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | | |
| | and territori | es include Arizona, Ca | | vada, New Mexico, Puerto R | nity property state or territor ico, Texas, Washington and V | | | | | |
| Part 2 | | n the Sources of You | , | , | | | | | | |
| Fi | ill in the tota | al amount of income yo | nployment or from operatin ou received from all jobs and a have income that you receiv | all businesses, including part | | ndar years? | | | | |
| | No ■ Yes. Fill | in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$6,027.02 | ☐ Wages, commissions, bonuses, tips | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | |

Official Form 107

Debtor 1 O'Neal Oblifias Document Page 34 of 51 Case number (if known)

| | | | | D.L. | | | | D.I. | | | |
|----|---|---|--|--|---|--|---|---|--|---|--|
| | | | | Debtor 1 | | | | Debtor 2 | | | |
| | | | | Sources of Check all t | | | s income e deductions and ions) | Sources of i Check all tha | | Gross income (before deductions and exclusions) | |
| | last caler nuary 1 to | ndar year: December | 31, 2015) | ■ Wages bonuses, t | , commissions, ips | | \$27,781.00 | | ☐ Wages, commissions, bonuses, tips | | |
| | | | | ☐ Operati | ng a business | | | ☐ Operating | a business | | |
| | (January 1 to December 31, 2014) | | | ■ Wages bonuses, t | , commissions, ips | | \$21,291.00 | | ☐ Wages, commissions, bonuses, tips | | |
| | | | | ☐ Operati | ng a business | | | ☐ Operating | a business | | |
| 5. | Include in unemploy gambling List each | come regard ment, and o and lottery v | dless of wheth ther public be winnings. If yo | ner that incorenefit payments ou are filing a | me is taxable. Examts; pensions; rer | amples ontal incon | | e alimony; child sunds; money colle eceived together, | cted from law list it only onc | Security, suits; royalties; and e under Debtor 1. | |
| | ■ No □ Yes. | Fill in the de | etails. | | | | | | | | |
| | | | | Debtor 1 | | | | Debtor 2 | | | |
| | | | | Sources of Describe be | | | income e deductions and ions) | Sources of in Describe below | | Gross income (before deductions and exclusions) | |
| | ■ Yes. | During the No. Yes * Subject | 90 days before Go to line 7 List below expaid that crutor include to adjustmentor Debtor 2 composed Go to line 7 List below expanding to the following formulation of the following formulatio | pre you filed to a control of the co | to whom you pai ot include paymer of an attorney for the and every 3 year or primarily consu- for bankruptcy, di | id you pa id a total hts for do his bankr is after th umer dek id you pa | y any creditor a to of \$6,225* or more mestic support ob uptcy case. at for cases filed co ots. y any creditor a to of \$600 or more a | e in one or more pligations, such as on or after the dat tal of \$600 or mo | payments and child support e of adjustme re? | If the total amount you that and alimony. Also, do ent. | |
| | Creditor | 's Name an | d Address | | Dates of payme | nt | Total amount | Amount you | | payment for | |
| _ | | | | | | | paid | still owe | | | |
| 7. | Insiders in corporation including support an | nclude your one of which | relatives; any you are an of | general part fficer, directo | ners; relatives of r, person in contr | any general | | nerships of which e of their voting s | you are a ger ecurities; and | | |
| | ■ No □ Yes. | List all payr | nents to an ir | nsider | | | | | | | |
| | Insider's | Name and | Address | | Dates of payme | nt | Total amount paid | Amount you still owe | | or this payment | |

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| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost | | yments or transfer a | any property on a | account of a d | ebt that benefited an | | | |
|-----|---|----------------------------|-----------------------|----------------------------|-------------------------|---|--|--|--|
| | ■ No | | | | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name | | | |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | | • | , | • | • | | | |
| | □ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case | | | |
| | IL Farmers/Khors v. Oblifias 15MI-015445 | car accident | Cook County | | ☐ Pending☐ On appe | | | | |
| | | | | | Conclud | led | | | |
| 11. | ■ No □ Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankrul accounts or refuse to make a payment becomes to make a payment becomes a pay | | | Date nancial institutio | | Value of the property amounts from your | | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date take | action was | Amount | | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | ion of an assign | ee for the ben | efit of creditors, a | | | |
| Par | t 5: List Certain Gifts and Contributions | | | | | | | | |
| 13. | Within 2 years before you filed for bankrup ☐ No ☐ Yes. Fill in the details for each gift. | otcy, did you give any gif | ts with a total value | of more than \$6 | 00 per person | ? | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Date the o | s you gave gifts | Value | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | |
| | United Way | \$40 per month | | | | \$0.00 | | | |
| | Person's relationship to you: | | | | | | | | |

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| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity ■ No □ Yes. Fill in the details for each gift or contribution. | | | | | | | | | | |
|-----|--|----------|---|---|-------------------|--|--|--|--|--|--|
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod | total | Describe what you contributed | Dates you contributed | Value | | | | | | |
| Par | t 6: List Certain Losses | | | | | | | | | | |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? | | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Describe the property you lost and | Descri | be any insurance coverage for the loss | Date of your | Value of property | | | | | | |
| | how the loss occurred | | the amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B: ty. | loss | lost | | | | | | |
| Par | t 7: List Certain Payments or Transfer | s | | | | | | | | | |
| 16. | consulted about seeking bankruptcy or | preparir | d you or anyone else acting on your behalf pay ng a bankruptcy petition? s, or credit counseling agencies for services requir | | rty to anyone you | | | | | | |
| | □ No | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | | |
| | Costello & Costello 19 N. Western Ave. (RT 31) Carpentersville, IL 60110 Carpentersville, IL 60110 steve@costellolaw.com | | Attorney Fees | \$995.00 plus court costs of \$335.00 and credit report fee \$33.00 paid prior to filing. | \$1,363.00 | | | | | | |
| | Summit Financial Education | | \$9.95 for required credit counseling | Prior to filing. | \$9.95 | | | | | | |
| | summitfe.org | | | | | | | | | | |
| 17. | promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | | | |
| | Yes. Fill in the details. Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | | |
| | | | | | | | | | | | |

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Debtor 1 O'Neal Oblifias

| 18. | transferred Include bot | ears before you filed for bankrup I in the ordinary course of your be noutright transfers and transfers me and transfers that you have alrea | business or financial affa nade as security (such as | airs? the granting of | - | | | |
|-----|----------------------------|---|--|--------------------------|--------------------------|---|----------|---|
| | ■ No □ Yes. F | ill in the details. | | | | | | |
| | Person W Address | ho Received Transfer | Description and very property transfer | | payme | ibe any property or ents received or debts n exchange | Dat | e transfer was de |
| | Person's | relationship to you | | | | _ | | |
| 19. | beneficiary | rears before you filed for bankrur? (These are often called asset-pr | | ny property to a | a self-settle | d trust or similar device | of wh | nich you are a |
| | _ '' | ill in the details. | | | | | | |
| | Name of t | rust | Description and v | alue of the pro | operty trans | sferred | Dat | e Transfer was de |
| Par | t 8: List | of Certain Financial Accounts, Ir | nstruments, Safe Deposi | t Boxes, and S | torage Uni | ts | | |
| 20. | | ear before you filed for bankrupt | cy, were any financial ac | counts or inst | ruments he | eld in your name, or for | your b | enefit, closed, |
| | Include ch | ed, or transferred? ecking, savings, money market, ension funds, cooperatives, asso | | | | it; shares in banks, cred | dit unio | ons, brokerage |
| | ☐ Yes. F | ill in the details. | | | | | | |
| | | Financial Institution and Number, Street, City, State and ZIP | Last 4 digits of account number | Type of acco instrument | unt or | Date account was closed, sold, moved, or transferred | be | Last balance fore closing or transfer |
| 21. | | w have, or did you have within 1 her valuables? | year before you filed for | r bankruptcy, a | ıny safe de _l | posit box or other depo | sitory | for securities, |
| | ■ No | 20 to december 1 | | | | | | |
| | Name of F | ill in the details. Financial Institution | Who else had acc | | Describe | the contents | | o you still |
| | Address (| Number, Street, City, State and ZIP Code) | Address (Number, S State and ZIP Code) | treet, City, | | | h | ave it? |
| 22. | Have you s | stored property in a storage unit | or place other than your | home within | 1 year befo | re you filed for bankrup | tcy | |
| | ■ No □ Yes. F | ill in the details. | | | | | | |
| | | Storage Facility Number, Street, City, State and ZIP Code) | Who else has or I to it? Address (Number, S State and ZIP Code) | | Describe | the contents | | o you still ave it? |
| Par | t 9: Iden | tify Property You Hold or Contro | I for Someone Else | | | | | |
| 23. | Do you ho | d or control any property that so ne. | omeone else owns? Incl | ude any prope | rty you bor | rowed from, are storing | for, o | r hold in trust |
| | ■ No □ Yes. | Fill in the details. | | | | | | |
| | Owner's N Address (| lame Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | | Value |
| Par | t 10: Give | Details About Environmental In | | | | | | |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 16-80619 Doc 1 Filed 03/15/16 Entered 03/15/16 17:33:01 Desc Main Page 38 of 51
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O'Neal Oblifias Debtor 1

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) | if you Date of notice |
|--|------------------------------|
| No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address of hazardous material? Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, in Address (Number, Street, City, State and ZIP Code) | if you Date of notice |
| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, in know it Involved the street of the street | |
| ☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? ■ No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, in Address (Number, Street, City, State and ZIP Code) | |
| Address (Number, Street, City, State and ZIP Code) | |
| ■ No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if know it | f |
| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, in know it | fuer. |
| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) know it | f D-1f |
| 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include s | f you Date of notice |
| | settlements and orders. |
| ■ No □ Yes. Fill in the details. | |
| Case Title Court or agency Nature of the case Name Address (Number, Street, City, State and ZIP Code) | Status of the case |
| Part 11: Give Details About Your Business or Connections to Any Business | |
| 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connection. | ctions to any business? |
| ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-tir | - |
| ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | |
| ☐ A partner in a partnership | |
| ☐ An officer, director, or managing executive of a corporation | |
| ☐ An owner of at least 5% of the voting or equity securities of a corporation | |
| ■ No. None of the above applies. Go to Part 12. | |
| Yes. Check all that apply above and fill in the details below for each business. | |
| Business Name Describe the nature of the business Employer Identifica | |
| (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper | ial Security number or ITIN. |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your bus institutions, creditors, or other parties. | |
| ■ No | |
| Yes. Fill in the details below. | |
| Name Address (Number, Street, City, State and ZIP Code) | |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

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Case number (if known) Document

Debtor 1 O'Neal Oblifias

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ O' | Neal Oblifias | |
|--------|-----------------------|--|
| O'Ne | al Oblifias | Signature of Debtor 2 |
| Signa | ture of Debtor 1 | |
| Date | March 15, 2016 | Date |
| Did yo | u attach additional p | ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No | | |
| ☐ Yes | | |
| Did yo | u pay or agree to pa | someone who is not an attorney to help you fill out bankruptcy forms? |
| ■ No | | |
| □ Yes | . Name of Person | . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Debtor 1 | O'Neal Oblifias | | | |
|---------------------|--------------------------|-------------------|-------------------------------|--------------------------------------|
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | - |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISION | _ |
| if known) | | | | ☐ Check if this is an amended filing |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | _ |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | _ |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| B8 (Form 8) (12/08) | | Page 2 |
|--|---|------------------------------------|
| name: | ☐ Retain the property and redeem it. | ☐ Yes |
| | ☐ Retain the property and enter into a | |
| Description of | Reaffirmation Agreement. | |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| | | |
| Part 2: List Your Unexpired Personal Propert | | |
| | you listed in Schedule G: Executory Contracts and Une leases. Unexpired leases are leases that are still in effe | |
| | y lease if the trustee does not assume it. 11 U.S.C. § 36 | |
| Describe your unexpired personal property leas | eac. | Will the lease be assumed? |
| Describe your unexpired personal property leas | 555 | Will the lease be assumed: |
| Lessor's name: | | □ No |
| Description of leased Property: | | |
| Troporty. | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| | | Li res |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| , , | | — 163 |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| | | 66 |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| | | |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Laggaria nama | | |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Part 3: Sign Below | | |
| olgh Bolow | | |
| Under penalty of perjury, I declare that I have independent in the property that is subject to an unexpired lease. | dicated my intention about any property of my estate th | at secures a debt and any personal |
| | | |
| X /s/ O'Neal Oblifias O'Neal Oblifias | X Signature of Debtor 2 | |
| Signature of Debtor 1 | Jig. Id. (a. 0) D D D D D D D D D D D D D D D D D D | |
| • | | |
| Date March 15, 2016 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee
 \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-80619 Doc 1 Filed 03/15/16 Entered 03/15/16 17:33:01 Desc Main Document Page 46 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | O'Neal Oblifias | | Case No. | | |
|-------------|--|--|---------------------------------|-------------------------|--------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPENSATI | ON OF ATTORN | EY FOR DE | EBTOR(S) | |
| c | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert compensation paid to me within one year before the filing of the perendered on behalf of the debtor(s) in contemplation of or in contemplation. | petition in bankruptcy, or a | greed to be paid | to me, for services re | |
| | For legal services, I have agreed to accept | | \$ | 995.00 | |
| | Prior to the filing of this statement I have received | | \$ | 995.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. T | he source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. T | he source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. I | I have not agreed to share the above-disclosed compensation | with any other person unle | ess they are mem | bers and associates of | my law firm. |
| [| I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the | | | | aw firm. A |
| 5. I | n return for the above-disclosed fee, I have agreed to render lega | l service for all aspects of | the bankruptcy c | ase, including: | |
| b c | Analysis of the debtor's financial situation, and rendering advi Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and co [Other provisions as needed] | affairs and plan which may | y be required; | - | ruptcy; |
| u | Exemption planning; | | | | |
| 6. B | y agreement with the debtor(s), the above-disclosed fee does not Representation of the debtors in any discharge any other adversary proceeding: negotiations w filing of reaffirmation agreements and application USC 522(f)(2)(A) for avoidance of liens on house | ability actions, judicial ith secured creditors to ons as needed; prepar | lien avoidanc to reduce to m | arket value; prepa | ration and |
| | CERT | IFICATION | | | |
| | certify that the foregoing is a complete statement of any agreement of any agreement of the complete statement of the comp | ent or arrangement for pay | ment to me for re | epresentation of the de | ebtor(s) in |
| Ma | arch 15, 2016 | /s/ Stephen J. Costel | lo | | |
| Do | | Stephen J. Costello (Signature of Attorney | | | |
| | | Costello & Costello | | | |
| | | 19 N. Western Ave. (I | | | |
| | | Carpentersville, IL 60 847-428-4544 Fax: 8 | | | |
| | | steve@costellolaw.c | | | |
| | | Name of law firm | | | |

CONTRACT FOR LEGAL SERVICES

The undersigned (hereinafter referred to as "client") hereby enters into this Contract for legal services with the law firm of COSTELLO & COSTELLO P.C. (Hereinafter referred to as "firm") and hereby agrees as follows:

- 1. Client wishes to retain the law firm of COSTELLO & COSTELLO, P.C. to perform legal services in connection with a Chapter 7 Bankruptcy.
- 2. Firm's present schedule of fees regarding the preparation, filing and representation in Chapter 7 and the court filing fee for the following services are as follows:

| a. Analysis of qualification for Chapter 7 (means test) - which shall mean that firm shall render an opinion of whether client qualifies for filing Chapter 7 under or if the filing of a chapter 7 for client would constitute an abuse of the provisions of Chapter 7 pursuant to Title 11 United States Code section 707(b). | \$ 300.00 |
|---|----------------|
| b. Preparation of documents for Chapter 7 filing which includes, the petition, schedules, statement of financial affairs, notice of intent, and other documents required for the filing of the chapter 7. | \$ 500.00 |
| c. Filing of Chapter 7 petition, schedules, etc with the court and attendance at the meeting with the trustee (also called 341 meeting or meeting of creditors). | \$ 195.00 |
| d. Credit Report. | \$ 33.00 |
| e. Court filing fee. | \$ 335.00 |
| Total fees and court filing fee. | \$ 1,363.00 |

- 3. Client hereby understands that firm will not perform any of the above services until the fees for such service, including court costs or filing fees, is fully paid and only after all information and/or documents and/or signatures required for such services and/or the preparation of each document is provided to firm. Firm reserves the right to raise the amount of firm's fees for any services should client not pay for such services or provide necessary information or documents or signatures within a reasonable time from the date of this Contract or should the bankruptcy laws, or rules or procedures of the court materially change after the date of this Contract. Client further understands that any fees are deemed earned when paid and client shall not be entitled to any refund of any portion of any fees paid for services performed by firm or if firm is unable to fully provide any such services due to failure of client to provide necessary information or documents or signatures.
- 4. Firm is under no obligation to represent client in any additional matters including any additional matters arising within the Chapter 7 proceeding or any other Chapter that this Chapter 7 proceeding may be converted into. Should firm choose to represent client in any additional matters arising within the chapter 7 proceeding or other bankruptcy proceeding that this Chapter 7 may be converted into including, but not limited to, objections to claims, adversary proceedings, amendments to schedules, petition or statement of affairs. motions or objections presented by creditors, trustee or Judge or other matters, shall be billed at the rate of \$275.00 per hour plus costs and expenses. Such additional fees shall be due and payable upon demand unless otherwise agreed in writing. Firm reserves the right to raise its hourly rate upon written notice to client.
- Client will inform firm of any change of client's address or telephone number with the understanding that failure to do so will constitute default.
- 6. Client agrees to inform firm of any difficulties client may have in complying with this Contract and that this Contract may be altered changed or amended only by mutual agreement and approval by firm in

writing

- 7. Client may terminate employment of firm at any time but such termination will not alter any rights or duties under this Contract and such termination does not reduce the amount owed to firm except by agreement in writing.
- 8. Client understands that any default under paragraph 4,5, 6, or 7 or should client fail to fully cooperate with firm or fail to provide accurate or complete information to firm or any trustee, judge, creditor or other claimant or any other entity at any time during firm's representation of client either before or after the filing of the chapter 7 bankruptcy, such may result in withdrawal by firm but such withdrawal will not alter any clients obligations under this Contract and such withdrawal does not reduce the amount owing to firm except by agreement in writing and does not entitle client to any refund of any fees paid for such services.
- 9. Client agrees that client is responsible for all costs of collection, including all court costs and reasonable attorney's fees incurred by firm in the collection of any sums due hereunder.
- 10. Client understands that from time to time an attorney from firm may be unavailable to appear in court or at other proceedings on client's behalf and hereby agrees that another attorney may be designated by firm to substitute for one of firm's attorney's at such court or other hearing.
- 11. To the extent that this Contract is signed herebelow by more than one individual, then "client" as used herein shall mean both the singular and plural of such term and both individuals agree that they are jointly and severally liable for all obligations contained herein including but not limited to all sums due from client as provided herein.
- 12. If client is a corporation and is signed herebelow by an officer of such corporation, then such person signing for client represents that he or she is a duly authorized officer of such corporation and is authorized to enter into this Contract on behalf of such corporation and bind such corporation thereto and further agrees that he or she personally and individually guarantees payment of all amounts due from client as provided herein including but not limited to all fees, costs and expenses provided in paragraph 2 hereinabove and further agrees that he or she is responsible for all costs of collection, including all court costs and reasonable attorney's fees incurred by firm in the collection of any sums due hereunder from either client or such person signing personally and individually.
- 13. Any provision of this Contract which may be adjudged to be unlawful or invalid by a court of law or becomes unlawful or invalid by operation of law or legislation, shall thereafter become null and void, but all other provisions of this Contract shall continue in full force and effect.

The undersigned have voluntarily entered into this Contract and by the undersigned's signature(s) below agree to all of the obligations rights and duties herein.

Dated this 9th day of March ,2016.

Agreed and signed:

Costello & Costello, P/C. and Stephen J. Costello

Stephen J.\Costello

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United States Bankruptcy Court Northern District of Illinois, Eastern Division

| n re | O'Neal Oblifias | | Case No. | |
|------|--|--|------------------|---------------------------|
| | | Debtor(s) | Chapter | 7 |
| | VEI | RIFICATION OF CREDITOR N | MATRIX | |
| | | Number of | f Creditors: _ | 19 |
| | | | | |
| | The above-named Debtor(s) l (our) knowledge. | hereby verifies that the list of credi | tors is true and | correct to the best of my |

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A/R Concepts, Inc.

33 W. Higgins Rd.

Suite 715

Barrington, IL 60010

CITY OF CHICAGO
DEPT. OF REVENUE
PO BOX 88292
CHICAGO, IL 60680-1292

Comcast P O Box 3002 Southeastern, Pa 19398-3002

ComEd Bill Payment Center Chicago, IL 60668 Discover PO Box 30395 Salt Lake City, UT 84130 First Financial Asset Management, I 3091 Governors Lake Dr, Suite 500 Peachtree Corners, GA 30071

First National Collections Bureau 610 Waltham Way Sparks, NV 89434 Illinois Department of Transportati Division of Traffic safety 1340 North 9th Street Springfield, IL 62766 Illinois Farmers Insurance Company c/o Walsh & Townsend, Ltd. 205 West Randolph, Suite 1000 Chicago, IL 60606

Illinois Tollway Authority Attn:Collection-Legal Dept PO Box 5201 Lisle, IL 60532-5201 Kenneth R. Myers 106 Woody Way Oakwood Hills, IL 60013 Matt Khorsand 9 Pacer Tri Barrington, IL 60010

Nicor Gas P O Box 0632 Aurora, IL 60507 Office of Secretary of State Financial Resonsibility Section 2701 South Dirksen Parkway Springfield, IL 62723 Receivables Performance 20816 44th Avenue W Lynnwood, WA 98036

Receivables Performance Mgmt Attn: Bankruptcy Po Box 1548 Lynnwood, WA 98036 Stellar Recovery Inc 1327 Hwy 2 W Suite 100 Kalispell, MT 59901 Unique National Collections 119 East Maple St. Jeffersonville, IN 47130

Village of South Barrington Police Department 30 South Barrington Rd. Barrington, IL 60010

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STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. §341

INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Trustee, United States Department of Justice, has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of...

- (1) the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This information sheet contains only general principles of law and is not a substitute for legal advice. If you have questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed on your bankruptcy schedules. A discharge is a court order that says you do not have to repay your debts, but there are a number of exceptions. Debts which may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to pay any debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying any debts that were not listed on your bankruptcy schedules or that you incurred after you filed for bankruptcy.

WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document, which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court within 60 days after the first meeting of the creditors.

Reaffirmation agreements are strictly voluntary — they are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues your discharge order or within sixty (60) days after the reaffirmation agreement was filed with the court, whichever is later. If you reaffirm a debt and fail to make the payments required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any remaining debt.

OTHER BANKRUPTCY OPTIONS

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtor's farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtor must pay the chapter 13 trustee the amounts set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,347,500 (\$336,900 in unsecured debts and \$1,010,650 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

| _/ | s/ O'Neal Oblifias | March 15, 2016 |
|----|--------------------|----------------|
| I | Debtor's Signature | Date |